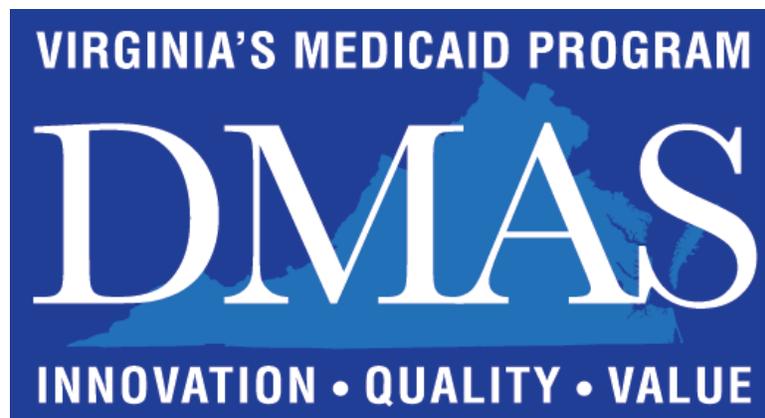


Monthly MCO Compliance Report

Medallion 4.0 July 2019 Deliverables



Health Care Services Division

September 20, 2019

Monthly MCO Compliance Report

Medallion 4.0 July 2019 Deliverables

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Compliance Points Overview

MCO	Prior Month Point Balance	Point(s) Incurred for Current Month*	Point(s) Expiring from July 2018	Final Point Balance*	Area of Violation: Finding or Concern
<u>Aetna</u>	4.0	0.0	0.0	4.0	<u>FINDINGS</u> Data Error
<u>Anthem</u>	1.0	2.0	0.0	3.0	<u>FINDINGS</u> Data Error Call Center Stats <u>CONCERNS</u> Data Error
<u>Magellan</u>	3.0	2.0	0.0	5.0	<u>FINDINGS</u> Data Error Late Submission <u>CONCERNS</u> EI Claim Timeliness
<u>Optima Health</u>	13.0	1.0	0.0	14.0	<u>FINDINGS</u> Data Error <u>CONCERNS</u> EI Claim Timeliness
<u>United</u>	4.0	2.0	0.0	6.0	<u>FINDINGS</u> Late Submissions <u>CONCERNS</u> Data Error
<u>VA Premier</u>	6.0	1.0	0.0	7.0	<u>FINDINGS</u> Data Error <u>CONCERNS</u> Data Error EI Claim Timeliness

**All listed point infractions are pending until the expiration of the 15 day comment period.*

Notes:

-**Findings**- Area(s) of violation; point(s) issued.

-**Concerns**- Area(s) of concern that could lead to potential findings; **no** points issued.

-**Expired Points**- Compliance points expire 365 days after issuance. Thus, all points issued in July 2018 (Issue date: 8/15/18) are expired as of 8/15/19 and are subtracted from the final point balance.

Summary

The **Compliance Review Committee (CRC)** met on September 5, 2019 to review deliverables measuring performance for July 2019 as well as other reported program issues. The CRC consists of five managers and supervisors from the Health Care Services division who vote on what, if any, compliance enforcement actions to take in response to identified issues of potential non-compliance.

The CRC voted to issue compliance points to managed care organizations (MCOs) for late submissions of reporting deliverables, submissions containing data errors, and failure to meet call center requirements. In addition, three of the MCOs had issues with the timely payment of early intervention (EI) claims.

Each MCO's compliance findings and concerns are further detailed below. Data related to the Health Care Services Division's compliance activities are also included. The Department communicated the findings of its review of July's compliance issues in letters issued to the MCOs on September 11, 2019.

Aetna Better Health of Virginia

Findings:

- No findings (*i.e.*, no compliance issues severe enough to necessitate the issuance of compliance points)

Concerns:

- **Data Submission Error:** The Department timely received the Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable from Aetna. Upon review, it was determined that the deliverable contained data errors. Specifically, the Department's subject matter expert determined that the report did not list all provider terminations Aetna received from the Department in Q2 2019, as required in Section 1.4.9.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Aetna violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. However, the Department's subject matter expert indicated that Aetna's data error was minor, and related to a relatively new requirement in the Medallion 4.0 Deliverables Technical Manual.

The Compliance Team recommended that in response to the issue identified above, Aetna be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. (CES # 2245)

MIP/CAP Update:

- No updates

Appeal Decision:

- No appeals

Expiring Points:

- No expiring points

Financial Sanctions Update:

- No outstanding sanctions at this time

Summary:

- For deliverables measuring performance for July 2019, Aetna showed an extremely high level of compliance. Aetna timely submitted all 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. One deliverable contained minor reporting errors (addressed above in **CES # 2245**). Aetna's member and provider call centers complied with abandonment ratio requirements, and Aetna complied with all applicable provider payment timeliness requirements. In summation, Aetna was a top performer in July 2019, and complied with almost every regulatory and contractual requirement.

Anthem HealthKeepers Plus

Findings:

- **Data Submission Error:** The Department timely received the July 2019 Community Mental Health Rehabilitation Services (CMHRS) Service Authorization and Registrations Report deliverable from Anthem. Upon review, it was determined that the deliverable contained data errors. Specifically, the report contained incorrectly entered Medicaid ID numbers in 2,443 rows, or 77.14% of all entries. The Medicaid ID numbers at issue were invalid, and thus did not comply with Section 1.8.55 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Anthem violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" should receive 1 point. As a result, the CRC voted to assess Anthem a **one (1) point violation** due to a reporting errors in its CMHRS Service Authorization and Registrations Report deliverable.

Anthem has accumulated 3.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, Anthem will not be issued financial sanctions for this issue. The CRC voted not to require Anthem to submit a corrective action plan (CAP). **(CES # 2241)**

- **Call Center Statistics:** Based on Anthem's July 2019 MCO Call Center Statistics deliverable, Anthem answered 93.07% of incoming provider calls in the month of July 2019. Per Section 5.4.A of the Medallion 4.0 contract, in order to be compliant, Anthem was required to answer at least 95% of incoming provider calls. Anthem failed to answer enough incoming provider calls to be in compliance in July 2019.

According to Section 10.1.E.b of the Medallion 4.0 contract, failures to comply with the contract that "represent[] a threat to [the] smooth and efficient operation" of the Medallion 4.0 program are subject to a 1 point penalty. As a

result, the CRC voted to assess Anthem a **one (1) point violation** for its failure to answer at least 95% of incoming calls to its provider call center.

Anthem has accumulated 3.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, Anthem will not be issued financial sanctions for this issue. The CRC voted not to require Anthem to submit a CAP. **(CES # 2242)**

Concerns:

- **Data Submission Error:** The Department timely received the Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable from Anthem. Upon review, it was determined that the deliverable contained data errors. Specifically, the Department's subject matter expert determined that the report did not list all provider terminations Anthem received from the Department in Q2 2019, as required in Section 1.4.9.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Anthem violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. However, the Department's subject matter expert indicated that Anthem's data error was minor, and related to a relatively new requirement in the Medallion 4.0 Deliverables Technical Manual.

The Compliance Team recommended that in response to the issue identified above, Anthem be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. **(CES # 2246)**

MIP/CAP Update:

- No updates

Appeal Decision:

- No appeals

Expiring Points:

- No expiring points

Financial Sanctions Update:

- No outstanding sanctions at this time

Summary:

- For deliverables measuring performance for June 2019, Anthem showed a generally high level of compliance. Anthem timely submitted all 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. Two deliverables contained reporting errors (addressed above in **CES # 2241 & 2246**). Anthem's member call centers complied with abandonment ratio requirements, but its provider call center did not meet the required answer/abandon rate (addressed above in **CES # 2242**). Anthem complied with all applicable provider payment timeliness requirements. In summation, Anthem complied with most applicable regulatory and contractual requirements.

Magellan Complete Care

Findings:

- **Data Submission Error:** The Department timely received the Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable from Magellan. Upon review, it was determined that the deliverable contained data errors. Specifically, the Department's subject matter expert determined that the data in the report corresponded to the first quarter of 2019 rather than the second quarter, in violation of Section 1.4.9.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Magellan violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. As a result, the CRC voted to assess Magellan a **one (1) point violation** due to reporting errors in its Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable.

Magellan has accumulated 5.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, Magellan will not be issued financial sanctions for this issue. The CRC voted not to require Magellan to submit a CAP. **(CES # 2244)**

- **Untimely Deliverable Submission:** Magellan failed to timely submit its quarterly Provider Network File deliverable as required the Medallion 4.0 Network Requirements Submission Manual. The report was due July 30, 2019, but was not submitted until August 1, 2019 after prompting from the Health Care Services Contracts and Administrative Unit.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Magellan violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. As a result, the CRC voted to assess Magellan a **one (1) point violation** due to its untimely submission of its quarterly Provider Network File deliverable.

Magellan has accumulated 5.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, Magellan will not be issued financial sanctions for this issue. The CRC voted not to require Magellan to submit a CAP. **(CES # 2248)**

Concerns:

- **Untimely Payment of EI Claims:** The Department timely received the July 2019 Early Intervention Services Report deliverable from Magellan. Upon review, the Compliance Unit discovered that the report indicated that Magellan failed to adjudicate 22 clean claims for EI services within 14 days of their receipt in July 2019.

Section 5.5 of the Medallion 4.0 contract requires the MCOs to adjudicate all clean claims for EI services within 14 days of their receipt. Thus, Magellan violated the terms of the Medallion 4.0 contract in failing to adjudicate clean claims for EI services within 14 days of their receipt. The Compliance Unit raised the issue with the Maternal and Child Health Unit Manager, and the manager indicated that as of the due date for deliverables measuring performance for August 2019, the MCOs will be subject to compliance points and/or financial sanctions for failing to timely pay EI providers.

Taking the Maternal and Child Health Unit Manager's comments under advisement, the Compliance Team recommended that in response to the issues identified above, Magellan be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. **(CES # 2291)**

MIP/CAP Update:

- No updates

Appeal Decision:

- No appeals

Expiring Points:

- No expiring points

Financial Sanctions Update:

- No outstanding sanctions at this time

Summary:

- For deliverables measuring performance in May 2019, Magellan showed a generally high level of compliance. Magellan timely submitted all 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. Magellan submitted a quarterly deliverable late, as addressed above (in **CES # 2248**). Magellan also submitted a deliverable with reporting errors (addressed above in **CES # 2244**). Magellan's member and provider call centers complied with abandonment ratio requirements, and outside of an issue listed above (in **CES # 2291**), Magellan complied with all applicable provider payment timeliness requirements. In summation, Magellan complied with most regulatory and contractual requirements.

Optima Health

Findings:

- **Data Submission Error:** The Department timely received the Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable from Optima. Upon review, it was determined that the deliverable contained data errors. Specifically, the Department's subject matter expert determined that the data in the report corresponded to the first quarter of 2019 rather than the second quarter, in violation of Section 1.4.9.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Optima violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. As a result, the CRC voted to assess Optima a **one (1) point violation** due to reporting errors in its Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable.

Optima has accumulated 14.0 points, placing it in Level 2 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, the Compliance Deficiency Identification System requires a plan in Level 2 to be issued a financial sanction in the amount of \$5,000 for each compliance enforcement action taken. As a result, Optima will be assessed a **\$5,000 financial sanction** for reporting errors in its Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable. The CRC voted not to require Optima to submit a CAP. **(CES # 2243)**

Concerns:

- **Untimely Payment of EI Claims:** The Department timely received the July 2019 Early Intervention Services Report deliverable from Optima. Upon review, the Compliance Unit discovered that the report indicated that Optima failed to adjudicate 20 clean claims for EI services within 14 days of their receipt in July 2019.

Section 5.5 of the Medallion 4.0 contract requires the MCOs to adjudicate all clean claims for EI services within 14 days of their receipt. Thus, Optima violated the terms of the Medallion 4.0 contract in failing to adjudicate clean claims for EI services within 14 days of their receipt. The Compliance Unit raised the issue with the Maternal and Child Health Unit Manager, and the manager indicated that as of the due date for deliverables measuring performance for August 2019, the MCOs will be subject to compliance points and/or financial sanctions for failing to timely pay EI providers.

Taking the Maternal and Child Health Unit Manager's comments under advisement, the Compliance Team recommended that in response to the issues identified above, Optima be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. (CES # 2292)

MIP/CAP Update:

- No updates

Appeal Decision:

- **CES # 2201 & 2221:** The Department received the following message from Optima in regards to **CES # 2201 & 2221**, cases in which Optima was issued one (1) point violations for the untimely submission of the June 2019 MCO Call Center Statistics Report and the June 2019 ARTS Patient Utilization Management and Safety Program (PUMS) Report, respectively:

"Optima Health is in receipt of your letters dated August 6 2019 for the below:

- Case ID 2201: MCO Call Center Statistics Report – Late Submission
- Case ID 2221: ARTS Patient Utilization Management and Safety Program (PUMS) Report – Late Submission.

Optima Health became aware of an issue with the DMAS FTP site during our submission process for July monthly reports. We uploaded the two reports indicated above on the site along with eight other monthly reports on July 12, 2019. Optima did not receive a confirmation e-mail from DMAS (as typically occurs) after our submission. Our Reporting Specialist e-mailed [the manager of the Health Care Services Systems and Reporting Unit] on July 12th to inquire about our submission to ensure they were received by DMAS. We did not receive a response.

A follow-up e-mail was sent on July 15, 2019 to confirm receipt of the reports uploaded on July 12th. Since we again did not receive a response, Optima uploaded the eight reports once again on the 16th to ensure DMAS had our

data. Our e-mails to DMAS regarding monthly reports also made inquiries into the receipt our Medallion 3.0 reporting deliverables. There appeared to be an issue with the confirmation after submission of these reports as well.

Optima respectfully requests that no compliance points be issued for the late submission of these two reports as they were first placed on the FTP site on July 12th.

Thank you for the opportunity to respond on this Warning Letter.”

Upon reviewing Optima’s statement, the CRC voted to uphold the actions taken in conjunction with **CES # 2201 & 2221**. The Department sent the following response letter to Optima:

“The Health Care Services Compliance Review Committee (CRC) recently met on September 5, 2019. During this meeting, the CRC reviewed Optima’s August 9, 2019 letter, sent in response to compliance case ID #2201 (late submission of monthly MCO Call Center Statistics Report) and #2221 (late submission of monthly ARTS PUMS Report).

Optima's August 9 letter requested that the points and associated financial sanctions be overturned for those two cases. Optima indicated that it had technical difficulties when uploading its required monthly deliverables to DMAS' FTP. Optima indicated that it initially uploaded its monthly deliverables to the FTP on July 12, in advance of the July 15 deadline. However, Optima indicated that it did not receive an FTP confirmation email as usual, and as a result, Optima staff reached out to [the manager of the Health Care Services Systems and Reporting Unit] via email on July 12 to confirm receipt, and again to unspecified DMAS personnel on July 15. Optima indicated that it did not hear back from [the manager of the Health Care Services Systems and Reporting Unit] or any other DMAS employee, and it thus re-submitted all of its monthly reporting deliverables on July 16, one day after the deadline. Optima requested that no compliance points be issued, because it uploaded both the MCO Call Center Statistics Report and the ARTS PUMS Report to the FTP on July 12. Optima did not submit any further materials related to case ID #2201 and #2221.

The CRC voted to uphold the compliance points and associated sanctions issued in case ID #2201 and #2221. The CRC could not confirm that Optima sent the emails that were referenced in its August 9 letter. [The manager of the Health Care Services Systems and Reporting Unit] indicated that he did not recall receiving such emails on July 12 or July 15, and the HCS Compliance Unit checked all individual and group boxes associated with the Compliance Unit and no FTP-related emails were received from Optima on July 12 or July 15. No evidence of the emails was attached to Optima's August 9 letter, and no such evidence was sent to the HCS Compliance Unit via prior or subsequent

communication. Without some form of proof of the emails at issue being sent, the CRC could not confirm their existence.

The Compliance Unit presented evidence to the CRC showing that all of Optima's required monthly deliverables except the two at issue in case ID #2201 and #2221 were received via the FTP on or before July 12. However, the Compliance Unit's records showed that the MCO Call Center Statistics Report was received for the first time on July 16, and the ARTS PUMS Report was received for the first time on July 25. The CRC found that, based on the materials provided by Optima and DMAS' internal records, it could not confirm that the files at issue in case ID #2201 and #2221 were included in Optima's July 12 FTP upload as Optima claimed in its August 9 letter. The CRC thus voted to uphold the points and associated sanctions in case ID #2201 and #2221."

Expiring Points:

- No expiring points

Financial Sanctions Update:

The following financial sanctions will be sent to Fiscal:

- June 2019 Untimely Deliverable Submission - \$5,000 **(CES # 2201)**
- June 2019 Untimely Deliverable Submission - \$5,000 **(CES # 2221)**

Summary:

- For deliverables measuring performance for July 2019, Optima showed a generally high level of compliance. Optima timely submitted all 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. One deliverable contained reporting errors (addressed above in **CES # 2243**). Optima's member and provider call centers complied with abandonment ratio requirements, and outside of an issue listed above (in **CES # 2292**), Optima complied with all applicable provider payment timeliness requirements. In summation, Optima complied with almost every regulatory and contractual requirement.

UnitedHealthcare

Findings:

- **Untimely Deliverable Submissions:** United failed to timely submit its quarterly Provider Advisory Committee Report deliverable and its monthly Foster Care Transition Planning Report deliverable, as required by Sections 1.5.24 and 1.2.10, respectively, of the Medallion 4.0 Deliverables Technical Manual. The Provider Advisory Committee Report was due July 15, 2019, but was not submitted until July 26, 2019. The Foster Care Transition Planning Report was due August 15, 2019, but was not submitted until August 20, 2019, after prompting from the Compliance Unit.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, United violated the terms of the Medallion 4.0 contract in the deliverable submissions addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. As a result, the CRC voted to assess United **a one (1) point violation** due to its untimely submission of the quarterly Provider Advisory Committee Report deliverable, and **another one (1) point violation** due to its untimely submission of the monthly Foster Care Transition Planning Report deliverable.

United has accumulated 4.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, United will not be issued financial sanctions for these issues. The CRC voted not to require United to submit a CAP for either issue. **(CES # 2249 & 2269)**

Concerns:

- **Data Submission Error:** The Department timely received the Q2 2019 Providers Failing Accreditation/Credentialing & Terminations Report deliverable from United. Upon review, it was determined that the deliverable contained data errors. Specifically, the Department's subject matter expert determined that the report did not list all provider terminations United received from the Department in Q2 2019, as required in Section 1.4.9.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, United violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. However, the Department's subject matter expert indicated that United's data error was minor, and related to a relatively new requirement in the Medallion 4.0 Deliverables Technical Manual.

The Compliance Team recommended that in response to the issue identified above, United be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. **(CES # 2247)**

MIP/CAP Update:

- No updates

Appeal Decision:

- No appeals

Expiring Points:

- No expiring points

Financial Sanctions Update:

- No outstanding sanctions at this time

Summary:

- For deliverables measuring performance for July 2019, United showed a generally high level of compliance. United timely submitted 22 of 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. United's late monthly deliverable submission, as well as the late submission of a quarterly deliverable, are addressed above (in **CES # 2249 & 2269**). One deliverable contained a reporting error (addressed above in **CES # 2247**). United's member and provider call centers complied with abandonment ratio requirements, and United complied with all applicable provider payment timeliness requirements. In summation, United complied with almost every regulatory and contractual requirement.

Virginia Premier

Findings:

- **Data Submission Error:** The Department timely received the July 2019 Other Coverage Report deliverable from Virginia Premier. Upon review, it was determined that the deliverable contained data errors. Specifically, the Medicaid ID number and Other Coverage Type were incorrectly entered in 12.5% of the report's entries, in violation of Section 1.15.20.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Virginia Premier violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. As a result, the CRC voted to assess Virginia Premier **a one (1) point violation** due to reporting errors in its July 2019 Other Coverage Report deliverable.

Virginia Premier has accumulated 6.0 points, placing it in Level 1 on the Compliance Deficiency Identification System. As described in 10.1.D of the Medallion 4.0 contract, an MCO in Level 1 of the Compliance Deficiency Identification System is not subject to financial sanctions. As a result, Virginia Premier will not be issued financial sanctions for this issue. The CRC voted not to require Virginia Premier to submit a CAP. **(CES # 2289)**

Concerns:

- **Data Submission Error:** The Department timely received the July 2019 Returned ID Cards Report deliverable from Virginia Premier. Upon review, it was determined that the deliverable contained data errors. Specifically, every entry in the report contained formatting errors in the fields containing Medicaid ID numbers, program identifiers, and addresses, in violation of Section 1.7.10.2 of the Medallion 4.0 Deliverables Technical Manual.

Section 10.1.E.d.b of the Medallion 4.0 contract requires the MCOs to submit reporting deliverables timely, with accurate data, and in the format and layout specified by DMAS. Thus, Virginia Premier violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

According to Section 10.1.E.a of the Medallion 4.0 contract, failures to comply with the contract that "[i]mpair[] the Department's ability to properly oversee and/or analyze Contractor performance, including but not limited to reporting errors" are subject to a 1 point penalty. However, the Department's subject matter expert indicated that Virginia Premier's data error did not disrupt any of the Department's internal processes.

The Compliance Team recommended that in response to the issue identified above, Virginia Premier be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. **(CES # 2290)**

- **Untimely Payment of EI Claims:** The Department timely received the July 2019 Early Intervention Services Report deliverable from Virginia Premier. Upon review, the Compliance Unit discovered that the report indicated that Virginia Premier failed to adjudicate 27 clean claims for EI services within 14 days of their receipt in July 2019.

Section 5.5 of the Medallion 4.0 contract requires the MCOs to adjudicate all clean claims for EI services within 14 days of their receipt. Thus, Virginia Premier violated the terms of the Medallion 4.0 contract in failing to adjudicate clean claims for EI services within 14 days of their receipt. The Compliance Unit raised the issue with the Maternal and Child Health Unit Manager, and the manager indicated that as of the due date for deliverables measuring performance for August 2019, the MCOs will be subject to compliance points and/or financial sanctions for failing to timely pay EI providers.

Taking the Maternal and Child Health Unit Manager's comments under advisement, the Compliance Team recommended that in response to the issues identified above, Virginia Premier be issued a **Notice of Non-Compliance (NONC)** without any associated compliance points, financial sanctions, or corrective actions. The CRC agreed with the Compliance Team's recommendation, and voted to issue a **NONC without associated compliance points or financial sanctions** in response to this issue. **(CES # 2293)**

MIP/CAP Update:

- No updates

Appeal Decision:

- No appeals

Expiring Points:

- No expiring points

Financial Sanctions Update:

- No outstanding sanctions at this time

Summary:

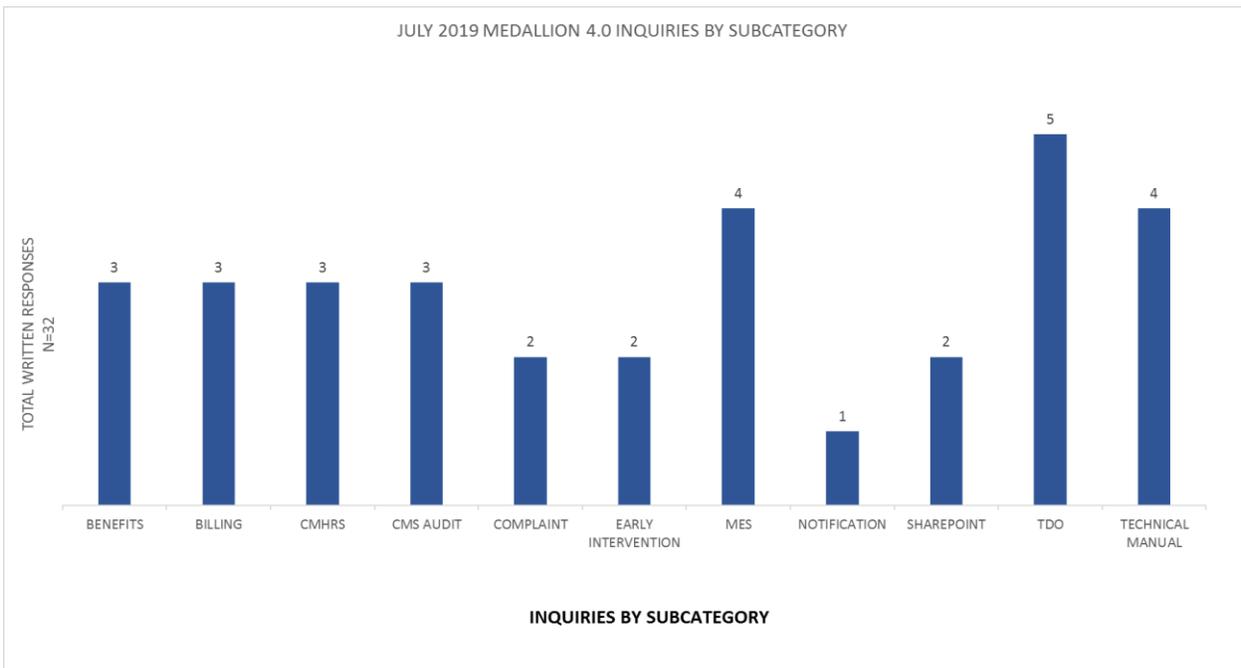
- For deliverables measuring performance in July 2019, Virginia Premier showed a generally high level of compliance. Virginia Premier timely submitted all 23 required monthly reporting deliverables, and those deliverables did not expose any programmatic issues. Two deliverables contained reporting errors (addressed above in **CES # 2289 & 2290**). Virginia Premier's member and provider call centers complied with abandonment ratio requirements, and outside of an issue listed above (in **CES # 2293**), Virginia Premier complied with all applicable provider payment timeliness requirements. In summation, Virginia Premier complied with almost every regulatory and contractual requirement.

Compliance Activity Data

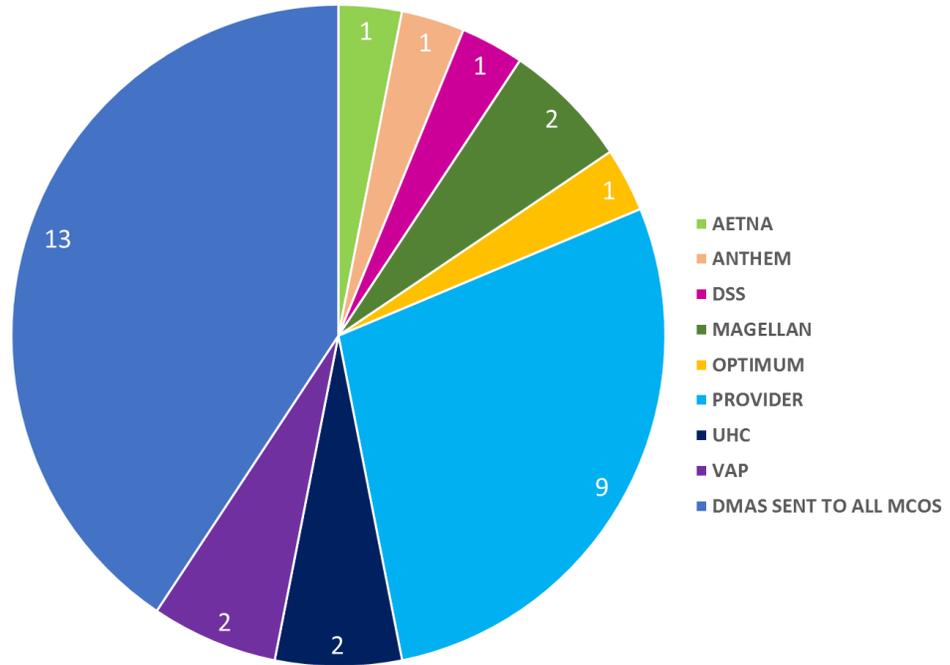
July 2019 – Member and Provider Solutions Unit

Member Inquiries <i>Received</i>	8
Provider Inquiries <i>Received</i>	43
MCO Inquiries <i>Received</i>	11
Constituent Concerns ("Pinks") <i>Received</i>	18
Marketing Materials <i>Reviewed</i>	157
Other Inquiries <i>Received</i>	63

MEDALLION 4.0 MAILBOX MONITORING



JULY 2019 MEDALLION 4.0 INQUIRIES BY PROVIDERS, STAKEHOLDERS & MCO



*All received were responded to n=32

PROVIDER FRAUD ACTIVITY THROUGH JULY

PROVIDER FRAUD ACTIVITY REFERRED TO MCOS		
Description	Open Cases	Closed Cases
GOOD CAUSE REFFERALS	0	14
PAYMENT SUSPENSIONS	2	12
INFORMATION REFEERAL TO MCO	0	7
ENDING PAYMENT SUSPENSIONS	0	9
MFCU INVESTIGATIONS	0	24
PROVIDER TERMINATIONS	0	28
PROVIDER TERMINATIONS (OTHER)	0	6
TOTAL	2	100

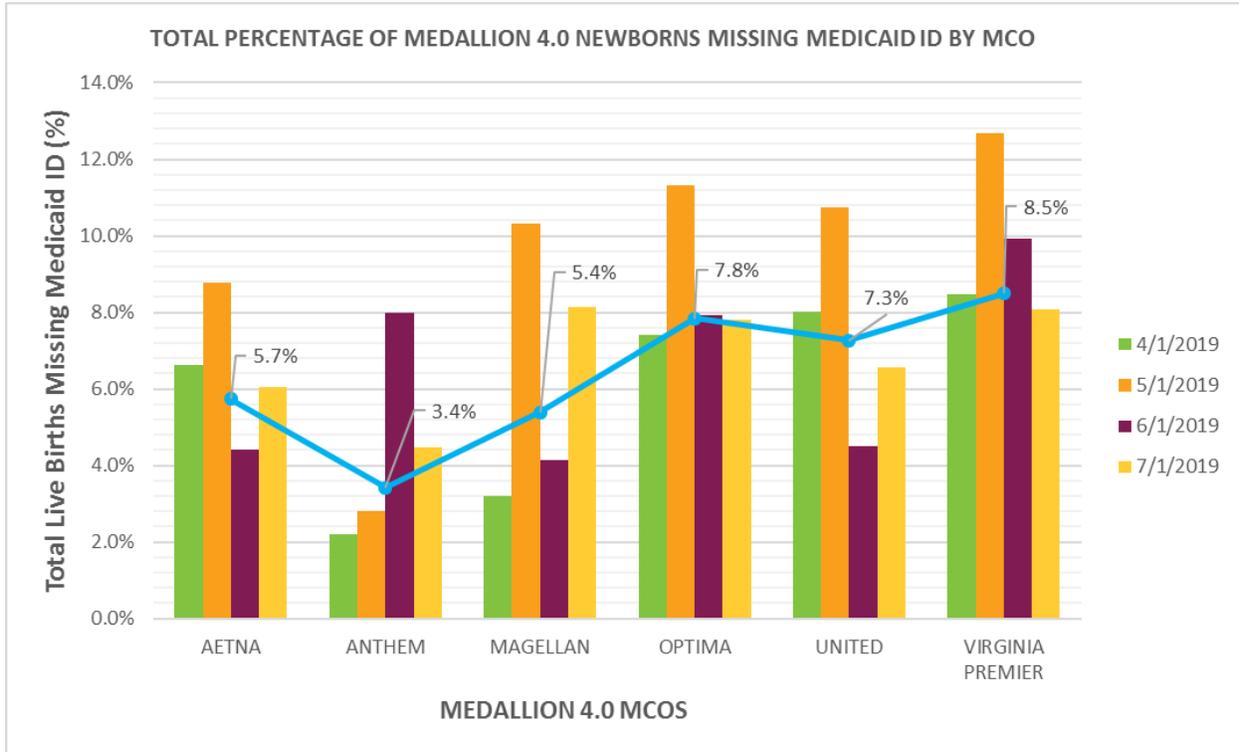
MEDALLION NEWBORN RECONCILIATION OVERSIGHT

MCO	2017_05	2017_06	2017_07	2017_08	2017_09	2017_10	2017_11	2017_12	2018_01	2018_02	2018_03	2018_04	2018_05	2018_06	2018_07
Anthem	F	F	F	F	F	C	F	F	F	S	S	S	S	S	S
Aetna	F	F	F	F	F	F	F	F	F	C	C	C	F	S	S
INTotal	F	F	C	F	F	F	F	F	F	F	F	C	S	S	S
Kaiser	F	F	F	F	F	F	F	F	F	F	F	C	F	F	F
Optima	F	F	F	F	F	F	F	F	F	F	F	S	S	S	S
VA Premier	F	C	C	F	F	F	F	F	F	C	F	S	S	S	S
S - Recon request file has been submitted to DMAS and is being processed for reconciliation payment.															
C - Waiting for MCO to approve Provider Payment Agreement in order to make final reconciliation payment and close the period.															
F - Closed. All newborn processing is complete for the MCO for the period.															

MEDALLION MAGELLAN BHSА CMHRS CLAIMS MONITORING

Reporting Month	Status	Retraction	Date Completed
SEPTEMBER	CLOSED	\$7,303.84	10/10/2018
OCTOBER	CLOSED	\$20,020.71	1/4/2019
NOVEMBER	CLOSED	\$119,047.14	3/29/2019
DECEMBER	OPEN	\$12,337.68	Pending
JANUARY	OPEN	\$6,396.68	Pending
FEBRUARY	OPEN	\$596.16	Pending
MARCH	OPEN	\$2,668.41	Pending
APRIL	OPEN	\$1,035.24	Pending
MAY	CLOSED	\$0.00	NA
JUNE	OPEN	\$291.48	Pending
Retraction Due			\$23,325.65
Actual Retraction Completed			\$146,371.69

MEDALLION 4.0 LIVE BIRTHS OVERSIGHT



MEDALLION 4.0 MCO PROVIDER CONTRACT REVIEWS JULY

Sub_Dt_MCO	Name	Submission_of	DMAS_Comp_Day	DMAS_Decision	MCO_Edits_Due	MCO_Comp_Day	DMAS_Ap_Dt	Final_Status
5/23/2019	Anthem	VA Medicaid Addendum for EyeMed Vision Care,	20	Resubmission	8/11/2019	15	7/3/2019	Approved
6/27/2019	United	Accountable Care Organization (ACO) Agreement	29	Resubmission	9/24/2019	Pending MCO		
6/27/2019	Aetna	NPO Medicaid Administrators, LLC Agreement	29	Resubmission	9/24/2019	3	7/29/2019	Approved
7/15/2019	Aetna	Hospital, Provider, Facility Agreement Templates	1	Resubmission	9/13/2019	14	7/29/2019	Approved

MEDALLION 4.0 MEMBER LETTERS DASHBOARD – JULY

MEDALLION 4.0 LETTERS DASHBOARD - JULY 2019			
	Date Approved	Date Sent	Total Letters Sent
Medallion 4.0 Assignment	7/19/2019	7/24/2019	6,260
Medallion 4.0 MedEx Assignment	7/19/2019	7/24/2019	11,162
Medallion 4.0 Re-Enrollment	7/19/2019	7/23/2019	1,861
Medallion 4.0 MedEx Re-Enrollment	7/19/2019	7/23/2019	1,015
Medallion 4.0 Change	NA	NA	0
Medallion 4.0 MedEx Change	NA	NA	0
Medallion 4.0 Maternal Child Health Letters	7/19/2019	7/23/2019	1,393
Medallion 4.0 OE Western/ Charlottesville/ Halifax	7/22/2019	7/25/2019	37,516
Total Letters Sent			59,207

Next Steps

At this time, the Compliance Unit is continuing monthly Compliance Review Committee meetings, following up on reoccurring issues, and communicating with the MCOs regarding identified issues. The Compliance Unit is in the process of expanding the types of compliance issues it investigates, and involving itself with programmatic issues as well as technical deliverable issues.

The Compliance Unit is expanding the amount of face-to-face contact it has with MCO compliance personnel, and is currently creating the framework for monthly MCO compliance calls and biannual compliance collaborative meetings.

The Compliance Unit is also responsible for generating and maintaining policies and procedures for the Health Care Services Division. The Compliance Unit has generated six policy and procedure documents to date, and the long-term project to create policies and procedures is ongoing.